

YOUTH SERVICES POLICY

Title: Investigative Services Next Annual Review Date: 05/02/2009	Type: A. Administrative Sub Type: 1. General Number: A.1.4
	Page 1 of 13
References: ACA Standards 3-JTS-1A-24, 3A-31, 3D-06, 3D-06-1, 3D-06-4 (Juvenile Training Schools); Performance-based Standards SaEP6 and SaEP16; YS Policies A.2.7 "Drug-Free Workplace", A.2.22 "Violence-Free Workplace", B.8.3 "Volunteer Services Program", C.1.3 "Crimes Committed on the Grounds of YS Facilities/Office Buildings and/or Properties", C.2.1 "Escapes and Runaways, Apprehensions, Reporting," C.2.6 "Safe Crisis Intervention and Use of Mechanical Restraints", C.4.3 "Mandatory Reporting of Abuse & Neglect of Youth", C.4.5 "Crisis Intervention Unit", C.5.1 "Performance Data and Information", C.5.3 "Central Office Audits - Secure Facilities and Non-Secure Residential Contract Facilities"; Children's Code Article 603, Investigative Services Handbook, Investigative Services Central Registry and Multiple Allegation databases	
STATUS: Approved	
Approved By: <i>Richard M. Thompson</i> <i>Deputy Secretary</i>	Date of Approval: 05/02/2008

1. **AUTHORITY:**

Deputy Secretary of Youth Services as contained in La. R.S. 36:405.

2. **PURPOSE:**

To establish guidelines for the operation of Investigative Services (IS).

3. **APPLICABILITY:**

The Deputy Secretary, Assistant Secretary, Deputy Assistant Secretaries, Facility Directors and Investigative Services staff are responsible for ensuring compliance with the spirit and intent of this policy.

4. **DEFINITIONS:**

Abuse - as defined by Ch.C. Article 603(1):

Any one of the following acts which **seriously** endanger the physical, mental, or emotional health and safety of the child: The infliction, attempted

infliction or, as a result of inadequate supervision, the allowance of the infliction or attempted infliction of physical or mental injury upon the child by a parent or any other person; The exploitation or overwork of a child by a parent or any other person; The involvement of the child in any sexual act with a parent or any other person, or the aiding or toleration by the parent or the caretaker of the child's sexual involvement with any other person or of the child's involvement in pornographic displays, or any other involvement of a child in sexual activity constituting a crime under the laws of this state.

For the purpose of this policy, it also includes abusive behaviors and uses of force as described in YS Policy A.2.1 "Employee Manual" - Employee Rule No. 3.

Administrative Issues - information discovered during an IS investigation or video review showing areas (other than issues involving employee rule violations) that the Director needs to address and/or correct. Examples of administrative issues include housekeeping, safety measures, or inefficient processes that need to be improved.

Neglect - as defined in part by Ch.C. Article 603(14), "the refusal or unreasonable failure of a parent or caretaker to supply the child with necessary food, clothing, shelter, care, treatment, or counseling for any injury, illness, or condition of the child, as a result of which the child's physical, mental, or emotional health and safety is substantially threatened or impaired."

Reportable Injury - an injury that threatens a youth's life or limb, that requires urgent treatment by a doctor, severely restricts the youth's usual activities or requires follow-up by a doctor.

Restricted Housing - for purposes of this policy, any location where a youth is housed in an individual room for the purpose of removal from programming or for specialized programming. Examples are Cypress, Winter, and Ivyleaf CIU, MHTU (Mental Health Treatment Unit), and TMHU (Transitional Mental Health Unit). Excluded are areas where youth are housed in individual rooms in recognition of good behavior and achievements.

Substantiated Report - an Investigative Services report following an allegation of abuse (Employee Rule #3) which finds that abuse occurred.

YS Central Office - Offices of the Deputy Secretary, Undersecretary, Assistant Secretary, Chief of Staff, Chief of Operations, Deputy Assistant Secretaries and their support staff.

5. POLICY:

Investigative Services (IS) assists the administration in creating a safe environment for youth and staff.

IS is charged with responsibility for investigating allegations of abuse on YS secure facility grounds. This includes acts of violence by youth-on-youth, staff-on-youth and youth-on-staff.

IS will conduct investigations on crimes committed on the grounds of secure facilities as described in YS Policy C.1.3 "Crimes Committed on the Grounds of YS Facilities/Office Buildings and/or Properties" and C.2.1 "Escapes and Runaways, Apprehensions, Reporting".

IS will conduct other investigations as assigned by the Deputy Secretary.

The *Investigative Services Handbook* establishes the procedures for the efficient operation of IS.

IS will maintain a toll-free telephone hotline available to youth and staff for reporting allegations of abuse and neglect. Each housing unit in YS secure facilities will contain at least one hotline telephone. The hotline telephones shall be located to permit unrestricted access and privacy.

Each YS secure facility shall be equipped with a video camera system maintained by IS, Information Technology, and Facility Maintenance.

6. PROCEDURES:

A. Reporting Allegations

1. Youth Services (YS) staff must report observations or suspicions of abuse and/or neglect as defined in this policy, excessive/unnecessary uses of force, and any instances of violence involving youth. Reporting is **mandatory** and shall be accomplished by advising a supervisor and by completing an Unusual Occurrence Report (UOR). In addition, staff may report allegations on the Investigative Services Hotline.
2. If, during a youth's visit to the infirmary, he informs health care staff of alleged abuse, or, if health care staff suspects abuse, the health care staff shall report the matter to the Investigative Services Hotline following delivery of necessary medical care. The allegation shall be documented

in the youth's medical record, an Accident/Incident Report shall be completed, and the Investigative Services Hotline call shall be noted in the appropriate infirmary log.

3. Reprisal or retaliation against employees or youth who report allegations is absolutely prohibited.

B. Incident Reports/Unusual Occurrence Reports

The Facility Deputy Director or designee shall provide copies of all IRs/UORs to IS on a daily basis.

C. Investigative Staff

1. IS will maintain sufficient staff to conduct timely investigations of allegations of abuse within secure facilities operated by YS.
2. The Director of IS, located at YS Central Office, is responsible for the operations of the facilities' IS Offices. There will be Central Office Supervisory Investigators over North Louisiana and South Louisiana who report to the Director of IS. They will supervise IS facility personnel and provide administrative oversight, quality review, technical assistance, and guidance to the facility investigators. Upon request they will assist the Directors. They may also be called upon to conduct investigations as circumstances and policy dictates.
3. The Director of IS may designate a lead investigator and/or supervisor at each facility IS office.
4. IS will coordinate and provide the services of a polygraphist.

D. Investigations

1. Every employee must cooperate with investigations being conducted by IS and follow the lawful orders or instructions given by IS staff. Failure to cooperate will result in disciplinary action.
2. Information contained in IS investigations is confidential.
3. Investigators shall follow the procedures and protocols described in the *Investigative Services Handbook*.

4. An investigator may not participate in the investigation of an incident in which he was personally involved, or where a conflict of interest exists.
5. If a Director, Deputy Director, or Assistant Director is the subject of an investigation, a Central Office Supervisory Investigator or IS Lead Investigator from another facility shall conduct the investigation.

E. Investigation Reports and Evidence

1. A written report shall be prepared for each investigation.
2. Finals reports shall be distributed as follows:
 - a. Substantiated (Rule #3) reports:
The Director of IS shall submit a copy of the entire report to the Facility Director.
 - b. Reports other than substantiated (Rule #3) reports:
 - The facility Lead Investigator will submit a copy of the title page, findings and conclusions of a final report to the Facility Director and a copy of the entire report submitted to the Director of IS.
 - Facility IS staff shall send a copy of the summary/conclusion portion of every IS investigation regarding staff misconduct to the facility Human Resources Office. The facility Human Resources Office will then send a copy to Central Office Human Resources to be filed in that employee's personnel record.
3. If the Facility Director disagrees with the findings and/or conclusion of the IS report, he will state his reasons in writing to the Director of IS. If the Director of IS agrees with the Facility Director, he will complete and send a supplemental report to the Facility Director and the Deputy Secretary. If the Director of IS does not agree with the Facility Director's position, he shall submit his reasons in writing to the Deputy Secretary, along with copies of the investigation and supporting documents, and the letter from the Facility Director. The Deputy Secretary will resolve the issue.
4. Employee disciplinary action for rule violations discovered and/or substantiated in the investigation will be initiated after the investigation has been completed. The Facility Director, in consultation with IS and Legal Services, may authorize that certain disciplinary actions be

initiated prior to the conclusion of the investigation. Facility staff shall initiate disciplinary action at the request of the Facility Director.

5. IS will determine the validity of Code of Conduct Reports issued to youth involved in an incident under investigation. If the results of the investigation indicate that the youth should not have been issued Code of Conduct reports, this determination will be reported to the Facility Director, in writing, and the Code of Conduct report(s) will be removed from the youth's record.
6. The Facility Director will be notified in writing of any significant administrative issue(s) discovered during the course of an investigation.
7. When IS or facility staff receives a request for investigation-related information from a parent, guardian or other known, close family member, whose identification is verified, and the person provides a mailing address at the time of the request, the staff member will complete a Request for Investigation-Related Information form (see the *Investigative Services Handbook*) and forward it to the facility IS Supervisor. The facility IS Supervisor will send the request form to the Director of IS. The Director of IS will refer the request to the Family Ombudsman, and confer and assist in composing an informative letter to the requestor. This letter shall be signed by the Family Ombudsman after approval from the Legal Section, with a copy to the Facility Director.
8. Electronically produced letters of the outcome of investigations will be issued to the youth and/or parent/guardian in accordance with the *Investigative Services Handbook*.
9. IS shall refer the following to the local District Attorney:
 - a. substantiated allegations of criminal sexual misconduct, and
 - b. physical abuse by staff resulting in any of the following:
 - lacerations requiring sutures
 - fractures
 - serious injuries
 - death

The Lead Investigator shall make the referral by certified mail, with copies to the Facility Director and Deputy Secretary. (See YS Policy C.1.3 "Crimes Committed on the Grounds of Youth Services' Facilities/Office Buildings and/or Properties").

10. Investigation reports and supporting documents will be securely maintained by each facility's IS office until the 25th birthday of the youth involved. Reports on incidents subject to criminal prosecution or civil litigation shall be retained until the matter is concluded; these documents shall not be destroyed without written approval from the General Counsel.
11. The following recorded images, such as video tapes and DVDs, whether recorded with hand-held equipment or with cameras installed at the facility, must be retained indefinitely:
 - a. those pertinent to an IS investigation,
 - b. those referred for prosecution,
 - c. those pertinent to civil litigation, and
 - d. those requested by Legal Services.

F. Hotline Access and Maintenance; JJPL Phones

Hotline Access

1. Youth must be provided direct and confidential access to the IS telephones. There shall be fully operational Hotline telephone(s) in each living area, at least one operational telephone in each counselor's office and at least one operational telephone in the infirmary. Youth placing Hotline calls in a counselor's office or in the infirmary shall be visually supervised.
2. The Central Office IS staff must check Investigative Services Hotline calls at least twice daily (seven days a week), and record data related to the calls using the forms designated for this purpose, and refer this data as appropriate (see the *Investigative Services Handbook*).
3. A staff member designated by the Facility Director to ensure the IS Hotline is accessible shall make a call on each hotline phone no less than twice per phone per week, announcing their name, facility, and dorm/location of the phone.

JJPL Phone Lines

There are phones maintained in each living area that are for direct access to the Juvenile Justice Project of Louisiana (JJPL). The Facility Director is responsible for having the JJPL phone lines checked for proper operation every Wednesday on the day shift. When these phone lines are checked, the caller will announce their name, facility, and dorm/location of the phone.

Maintenance

If a telephone does not work or the IS Hotline or JJPL phone is not accessible, the staff member designated by the Facility Director shall fill out an Investigative Services Telephone Maintenance Request Form (see the *Investigative Services Handbook*) that same day. The staff member shall give the form to the facility youth phone coordinator with a copy to the facility IS office. The telephone is to be repaired or access to the IS Hotline/JJPL phone is to be restored as soon as possible.

G. Database Management and Data Reports

1. Each facility's IS office is responsible for inputting abuse allegations into the IS Central Registry Database as described in the IS Central Registry Database Handbook.
2. YS Central Office IS Supervisory Investigators will maintain a central database containing the information from each of the facilities, as required by the IS Central Registry Database Handbook. This database will be used to track investigative progress and trends. It will also be used to extract the Multiple Allegation Database (MAD) to screen staff for multiple abuse allegations, and to identify employees who have received performance appraisal or disciplinary action as a result of these allegations, or who resigned while the investigation or disciplinary action was pending.

MAD shall be maintained during the employee's tenure with YS and for five years following the employee's separation.

3. The Director of IS will have his staff generate a report each month from the central registry database showing information regarding the investigations completed during the previous month and provide the report to the Continuous Quality Improvement Services (CQIS) by the 10th of each month. The report will include the information identified in Section 6.G.1. on page 7 of this policy.
4. IS will generate summary reports of allegations upon request by the Deputy Secretary, Legal Services, Deputy Assistant Secretaries and others as designated by the Deputy Secretary.
5. The IS Central Registry Database will not be purged or any data deleted without the express approval of the Deputy Secretary.

6. Additional monthly reporting requirements may be found in YS Policy C.5.1 "Performance Data and Information".

H. The Effect of MAD Findings on Personnel Matters

1. Facility Human Resources staff will request a report from Central Office IS regarding the MAD findings for prospective employees prior to an offer of employment. If any substantiated allegations are found, the Director of IS will refer the report to the Deputy Secretary for review. The Deputy Secretary will inform the Facility Director whether or not he will allow the individual to be hired. Central Office IS will also check the disciplinary database for any disciplinary actions taken against former staff and/or pending disciplinary actions at the time of the former staff member's departure from Youth Services. The Facility Director will be notified in writing of the findings. The written notification will be placed in the personnel file of the person, if they are hired.
2. Secure facilities shall not re-hire a former employee if, due to a finding of substantiated sexual misconduct, abuse as defined in Rule 3 of the Employee Manual, or a pattern of abusive behavior:
 - a. he was terminated;
 - b. he resigned to avoid dismissal; or
 - c. he resigned during an investigation which ultimately resulted in one or more of the above findings.

I. Removal of Staff, Disciplinary Action, and Staff Reminders about Violence

1. Any employee under investigation for physical abuse or sexual misconduct shall be removed from contact with youth or placed on leave pending investigation if the IS Investigator has a reasonable basis to believe that abuse or sexual misconduct warranting termination of employment may have occurred. The Facility Director will be notified verbally and in writing of the circumstances surrounding the investigator's findings and request to remove the staff from contact with youth.
2. Employees with substantiated abuse or sexual misconduct allegations shall receive performance appraisal action or disciplinary action appropriate to the circumstances.
3. Facility Directors will ensure that employees receive frequent reminders that violence will not be tolerated. The reminders may be in the form of

posters, written announcements on bulletin boards, announcements at roll-call sessions, memoranda or other methods at the discretion of the Facility Director.

J. Volunteer-Related Requirements

1. The facility Volunteer Services Coordinator will request a report from Central Office Investigative Services regarding the MAD findings for all prospective volunteers prior to approval. If there are findings, the report will be referred to the Deputy Secretary for review and approval. Documentation will be placed in each volunteer's file indicating the results of the MAD verification.
2. Secure facilities shall not approve a volunteer to provide services when a conflict with, or violation of policies and procedures, has been previously documented.

K. Video Review Requirements

1. Facility IS staff will review selected hours of video from randomly selected dormitories and other sites where youth may be located. Ideally, these reviews will be conducted each work day. The frequency, duration and location of the video to be reviewed shall be determined by the Director of IS in consultation with the Deputy Secretary.

Video review reports will be submitted on the day they are completed to designated CQIS staff, the Deputy Assistant Secretaries, Facility Directors and other staff as requested by the Facility Directors. The Lead Investigator will submit a report to the Director of IS at the end of each month detailing the number of video review hours completed for that month.

2. The Facility Director or his designee will maintain a binder of all video review forms submitted by IS. The Facility Director or his designee shall place another page behind each video review form, on which he shall record his observations, comments, and action taken in regard to administrative issues or rule violations pointed out in the video review. These binders will be subject to CQIS audit.
3. The Deputy Secretary, Deputy Assistant Secretaries, Director of the facility, or CQIS may ask the Director of IS to conduct video reviews for specific dates, times and locations. Time required to review these special requests shall be counted toward the required total monthly random video review time.

4. Requests by facility supervisory staff to view footage will be sent to the Lead Investigator. The request will be granted upon the approval of the Facility Director if that footage involves management issues and is for official purposes.
5. Requests for copies of video footage shall be made to the Lead Investigator, who has sole authority to provide copies of video footage to persons other than IS staff. Footage downloaded to disk will be turned over by the Lead Investigator to persons who must sign a document acknowledging receipt for the footage and agreeing that no unauthorized persons shall view or obtain such footage and the footage is used only for authorized purposes. At the facility level only the Facility Director or his designee may make a request for video footage.
6. Requests for video footage for training purposes will be processed and approved by the Director of IS. Any other requests will be processed and submitted for approval by the Director of IS, General Counsel, and the Deputy Assistant Secretary of Education, Treatment and Programming Services.

L. Quality Assurance Requirements

1. Quality Assurance audits of each facility office of IS will be conducted by the Director of IS. The frequency of these audits will be coordinated with CQIS. The audit information shall be recorded on forms created and furnished by CQIS and maintained in the IS Director's office.
2. Protocol for Quality Assurance Audits is described in the *Investigative Services Handbook*. Forms for audits will be created and furnished by CQIS.

M. Use of Video in Restricted Housing: Hand-held Recorders with Audio Capability

1. Each restricted housing unit shall possess and maintain a hand-held video recording device. Each Facility Director will ensure that staff members assigned to work in restricted housing units are trained in the use of video cameras and that the cameras are operational at all times.
2. When staff enters a youth's room in restrictive housing, there shall be another staff member recording the event on a hand-held video camera with audio capability. The recording will begin when the door is unlocked and open, and stops:

- a. when all staff have left the room, the youth is in the room, and the door is closed and locked; or
 - b. when the youth is on the unit, in the view of the permanently installed operational video recording equipment.
3. Staff may not enter a youth's room while the youth is in the room unless the video recorder is being used to record the entry. If the video recorder is not available, the youth will be asked to step out of his room into an area where video cameras are functioning.
4. Whenever a youth is brought into a housing unit, staff will not enter his room for the purpose of escorting the youth into the room, or removing his clothing, restraints, or other items unless the video recorder is being used to record the entry into the room.
5. IS will provide restricted housing units with an adequate supply of labeled recording media. Information to be filled in on the label will include the date of the event, time of the event, camera operator, wing and room number in which it was used, name of the youth involved, and the name of staff involved. The camera operator will be responsible for completing the data on the label and placing the video recording in the evidence box located in the unit. Only one incident will be recorded on an individual video tape cassette or unit. Once recorded, a recording medium shall not be erased, recorded over, recycled, or re-used in any way.
6. IS will be responsible for collecting the video recordings from the evidence locker located on the unit. Only IS will have keys and/or access to the evidence locker. IS will maintain custody of the video recordings.
7. All video recordings from restricted housing units will be reviewed by IS and documented on a random video review log.
8. Video recordings from hand-held devices received from restricted housing units will be maintained for 50 days unless needed for evidence.

N. Taking Youth out of Camera View

When a youth's behavior requires de-escalation techniques, staff is forbidden from removing youth to areas where no cameras exist or where they are not operational. Facility Directors will provide guidance to front line staff to ensure they understand the purpose of this directive, which is to make sure that de-escalation events are video recorded for the protection of both youth

and staff. Areas that specifically need to be avoided are closets, bathrooms, stairwells, and offices that are not covered by cameras.

Youth may be taken into areas not covered by cameras or where cameras are not operating only if they are accompanied by an officer who is recording the incident with a hand-held recorder.

O. Use of Force

1. IS shall review all use of force reports and incidents. The Lead Investigator will make a decision whether to investigate and at what level based on protocol from the *Investigative Services Handbook*.
2. IS Investigators, upon conducting reviews and investigations, will determine whether or not the force and/or techniques used were in accordance with YS policy on the use of force and safe crisis management techniques and training currently used by YS. Departure from these policies and techniques shall be noted in the findings of the investigation.

Previous Regulation/Policy Number: A-01-004 / A.1.4
Previous Effective Date: 06/30/2003
Attachments/References: